



**Mercer County Cultural and Heritage Commission
Local Arts Program (LAP) Grant
FY15 Final Report Form**

General Operating Support (GOS)

Special Projects (SP)

Technical Assistance (TA)

Deadline: January 8, 2016

Grant Organization Name	Grant Type? GOS SP TA	Grant Amount \$
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COMPLETE ALL SECTIONS OF THIS REPORT, WITH SPECIAL ATTENTION TO THOSE HIGHLIGHTED IN RED. INCOMPLETE REPORTS WILL BE RETURNED & FUNDING HELD UNTIL A COMPLETE REPORT IS SUBMITTED.

In addition to completing all sections of this Final Report form, also provide a narrative of two to three pages that addressing questions 1-19, as applicable, summarizing your organization's actions in carrying out its grant-funded activities. Use the **bold headings** below to organize your narrative. Don't forget to complete and attach the Activities Chart and ADA Evaluation Form. Report on the grant period 1/1/15-12/31/15. GOS grantees should report on all organizational activities/operations (do not include capital activities). SP and TA grantees should report only on those project activities.

Programs

1. Enter the total number of public arts-related activities/events supported through this grant.
Briefly describe all activities in the narrative.
2. Briefly describe in your narrative the Arts Development goals of your organization that were met in 2015.
Describe any challenges in implementing your goals, and efforts to meet those challenges.
If the goals were not met, describe impediments to success. Include significant modifications to organization's program content, timing, scope, or number of activities.
Describe any important or unexpected accomplishments, awards, or recognition received by your organization.

Finances— Enter the 2015 Actual Cash figures of the organization (GOS); or those specific to the Special Project (SP) or Technical Assistance (TA).for the following categories:

3. **Actual Cash Revenues** .
4. **Actual Cash Expenses** .
5. **Actual Cash Match** .
6. **Value of Inkind donations/services** – For more information, please see
IRS Publication 561 *Determining the Value of Donated Property* downloadable
at: irs.gov/pub/irs-pdf/p561.pdf.

Planning

7. Describe in the narrative accomplishments made in implementing your organization's long-range strategic plan during the past twelve months.

If progress was impeded, describe the issues or challenges that affected implementation of the plan.

If currently engaged in development of a new plan, describe the process and status.

Briefly describe any major issues or trends that have surfaced in any of your planning activities.

Partnerships/Collaborations

8. **Enter the total number of collaborations and partnerships with other organizations.**

Describe in the narrative collaborations/partnerships along with the resulting activities/events. (Other organizations including arts and non-arts organizations, social service agencies, educational institutions, businesses, government agencies.)

Describe major accomplishments and/or obstacles that may have impeded these efforts

Governance/Management

9. Were there any significant changes in managerial or board leadership during the past year that may have affected programming or operations? ☐ Yes ☐ No

If yes, please describe in the narrative how new leadership impacted operations, and inform MCC&HC of any changes so that we might change our contact information.

Public Benefit/Accessibility/Participation

10. Describe in the narrative how your organization assesses the breadth and diversity of the population, countywide, which is served through its programs and services. Include senior citizens, youth, people with disabilities, folk/traditional artists, rural or diverse urban communities, and other groups.

Detail any specific efforts to broaden, deepen and/or diversify participation in events/activities, including innovative ways organization has increased participation.

11. Has the organization made progress in implementing or developing an ADA Plan? ☐ Yes ☐ No

If yes, describe accomplishments, if no, discuss impediments to progress and remedies being sought.

12. Describe in the narrative how the organization serves individual artists and/or is working toward greater service to artists.

How might these services be used as models to other organizations?

13. It is vitally important that the following information be provided to the New Jersey State Council and, in turn to the National Endowment for the Arts, on the Arts to support public benefit, participation and impact of this tax-payer-supported grant program.

Attendance: To the best of your knowledge, report attendance and artists engaged at all events/activities. *Count someone who attended multiple events each time he/she attended.* See Note, below for description of indirect attendance/participation/beneficiaries.

a. **Adult live attendance** ..


b. **Youth (under 18) live attendance** ..

c. **Total live attendance** ..

d. **Indirect attendance/participation*** ..

e. **Artists engaged** ..

f. Adults benefiting	
g. Youth (under 18) benefiting	
h. Indirect beneficiaries*	
i. Artists engaged	
j. Total benefiting	



Audience Demographics

14. For the figures provided under Attendance and Individuals Benefiting in question 12, describe in your narrative the composition of your audiences in terms of race, ethnicity, age, income level, education level, disabilities, etc. the best that you are able.

15. **Anecdotal:** Describe in your narrative at least one brief but compelling anecdote of how an individual benefited in a meaningful way from one of your activities or how one of your programs demonstrated the public value of the arts, such as contributing to economic development, education, youth at risk, healthcare, tolerance, tourism, etc. Feel free to present more than one anecdote. These will be important demonstrations of the public value of the arts.

Arts Education

16. Expenditures attributable to pro-active arts education activities such as classes, seminars, symposia, school workshops, residencies and gallery talks.

Approximate percentage of 2015 budget

The following two questions relate to information being gathered to report to the National Endowment for the Arts and the National Assembly of State Arts Agencies solely for the purpose of gathering statistical national data on the arts.

17. **Project Descriptors:** Check which, if any, of the descriptors below comprise a significant portion (50% or more) of the grant resources/funded activities. Check all that apply. If none apply, or if the below descriptors apply to a small or indeterminate portion of your funding/activities, do not check any boxes.

☐ Accessibility – increasing access for people with disabilities.

☐ International – grantees visiting other countries, foreign artists visiting the U.S., cultural exchange programs, linkages with artists/organizations in other countries, and other international programs.

☐ Presenting/Touring – movement of artists and artworks for performances, screenings, exhibits, etc. in different geographic areas as either the presenter or touring group.

☐ Technology – for creation or dissemination of artworks or for organizational management.

☐ Youth at Risk – programs designed primarily to serve at-risk youth, including drug, violence, alcohol, crime intervention.

☐ Older Adults – programs involving older adults as the primary artists, participants, or beneficiaries as well as programs in elder care settings, senior centers, or retirement residences.

☐ Health/Healing – programs using the arts specifically to promote good physical or mental health or to aid in healing, serving individuals, institutions or communities, e.g., in response to natural disasters or tragedies.

☐ Economic Development – use of the arts as an economic development tool.

☐ Cultural Heritage Tourism – activities that promote cultural events specifically to tourist populations and/or use arts, heritage or history offerings as traveler destinations and integration of culture into tourism development plans.

18. Project Race/Ethnicity: Using the characteristics listed below; indicate if the programs for which you received funding specifically emphasize the culture or traditions of any one group below by entering the corresponding letter code in the box. If your program does not emphasize the culture or traditions of one group, please fill in "G" for "General." If the funding you receive covered many programs and you cannot use one code, you should also enter the "General" or "G" code.

N—Native American/Alaska Native B—African-American A—Asian-American
H—Hispanic/Latino P—Native Hawaiian/Pacific Islander
W—White, not Hispanic G—General (project does not emphasize any one race)

19. International Activity: Please indicate if your organization's activities meet any of the following criteria: ☐ Yes ☐ No

supports artists visiting other countries, or
supports foreign artists visiting the U.S., or
supports any cultural exchange program, or
supports linkages with artists or institutions, in other counties, or
establishes/administers international programs in your own organization

If your organization includes no international focus or components, please check "No."

Photographs: If you have photographs available, please submit two non-returnable publishable photographs of activities from the past year (prints, slides, on CD or disk – may be emailed) along with a description and the appropriate releases and permission to reproduce without limitation by MCCH&C and NJSCA and its program partners. Images should demonstrate the public benefit or value provided by the grant funded activities, such as individuals engaged in art-making or actively participating as audience members, school children participating in an arts activity, artists at work, etc.

I have enclosed ☐ prints ☐ CD ☐ disk ☐ will forward via email to
lramo@mercercounty.org or chreed@mercercounty.org

Narrative: Remember to attach at least a three-page narrative that addresses Questions 1-18 as applicable, and summarizes your organization's accomplishments in carrying out its grant-funded activities.

Support Materials: You are not required to submit support materials with the final report, unless the grant funded development of a specific product, such as an anthology or film, in which case, a copy or sample footage should accompany the final report.

Certification: We certify that the information contained in this report is true and correct, and that all expenditures were incurred solely for the purpose of this grant. Two different signatures required: one must be of a board officer or organization official.

Please sign in blue ink.

Executive Director or other Program Official (please print)

Signature

Date

Board President or Treasurer (please print)

Signature

Date

Please list your organization's public events, projects/programs that are directly funded by the MCC&HC LAP grant. Count each performance as one event, an exhibition as one (not each day exhibition is up), each course as one (not each class), etc. Do not include board meetings or other non-public events and activities.

[illegible]

ADA Evaluation Form

In the right column, list the services or accommodations that your organization, or the venue that your organization used, offers for people with disabilities, e.g., listening devices, sign interpreter, large print programs, etc.

[illegible]

FINANCE CHART #1 - INCOME

The chart below is for your use to calculate the Actual Cash Revenues of the organization for General Operating Support (GOS) grant; or to calculate the Actual Cash Revenue for the specific Special Project (SP) or Technical Assistance (TA) grant project. *This chart is for the organization's use and does not have to be returned with the final report.*

A. EARNED INCOME	FY15 Budgeted from Contract	FY15 Actual Income
Admissions		
Contracted Services		
Other Revenue <i>(from endowment, other investment income, sales, commissions, etc.)</i>		
SUBTOTAL EARNED INCOME		
B. CONTRIBUTED INCOME		
Corporate Support (list top 5)		
1.		
2.		
3.		
4.		
5.		
All others ()		
SUBTOTAL CORPORATE		
Foundation Support (list top 5):		
1.		
2.		
3.		
4.		
5.		
All others ()		
SUBTOTAL FOUNDATION		
Governmental Support (list top 5): <i>do not include MCC&HC LAP grant here (it goes on line D) GOS grantees should list NJ Cultural Trust Grant here (if applicable)</i>		
1.		
2.		
3.		
4.		
All others ()		
SUBTOTAL GOVERNMENTAL SUPPORT		
Individuals		
SUBTOTAL CONTRIBUTED section B		
C. GRANTEE CASH		
D. THIS MCCH&H LAP GRANT		
E. TOTAL INCOME (A + B + C + D)		

Note the value of any in-kind goods or services (these should not be shown in income above) \$

FINANCE CHART #2 - EXPENSES

The chart below is for your use to calculate the Actual Cash Expenses of the organization for General Operating Support (GOS) grant; or to calculate the Actual Cash Expenses for the specific Special Project (SP) or Technical Assistance (TA) grant project. *This chart is for the organization's use and does not have to be returned with the final report.*

	FY15 Budgeted from Contract Agreement	FY15 Actual Expenses from your records	FY15 Expended from MCC&HC LAP grant
A. PERSONNEL			
Administrative salaries			
Artistic salaries			
Technical/Production salaries			
Fringe benefits			
SUBTOTAL PERSONNEL			
B. OUTSIDE FEES & SERVICES			
Artistic			
Other			
SUBTOTAL OUTSIDE FEES & SERVICES			
C. CAPITAL EXPENDITURES			
Acquisitions			
Other			
SUBTOTAL CAPITAL EXPENDITURES			
D. OTHER OPERATING EXPENSES			
Space Rental/Mortgage Payments			
Marketing <i>(advertising, PR, etc.)</i>			
Travel & Transportation			
Phone & Postage			
Facility Maintenance			
Rentals			
Supplies & Materials			
Insurance			
Technical/Production (non-personnel)			
Repayment of Loans			
Other <i>(itemize if over 5% of Line E below)</i>			
SUBTOTAL OTHER OPERATING EXPENSES			
E. TOTAL CASH EXPENSES			
F. TOTAL INCOME <i>(from Chart #2 on page 4 for Actual column)</i>			
G. Total Annual (Deficit)/Surplus <i>(F minus E)</i>			
H. Accumulated Organizational Operating (Deficit)/Surplus*			

If your organization received a Cultural Trust Stabilization grant for FY15, enter the Cultural Trust funds spent for the project during the grant period \$. This amount must be subtracted from your total expenses before you can determine whether the match was met (by law Cultural Trust grants cannot be used to meet the match for other State of NJ grantees).

Endowment ☐ Cash Reserve ☐

* This would not include any cash reserves or endowments, which may be noted here, below the chart.